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Bib Data Sheet

CONFIRMATION NO. 7011

SERIAL NUMBER 10/763,491	FILING DATE 01/23/2004  RULE	CLASS 118	GROUP ART UNIT 1734	ATTORNEY DOCKET NO. MILA.36091
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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* *No BAC*\*\* FOREIGN APPLICATIONS \*\*\*\*\* *No. BAC*

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*

\*\* 04/28/2004

Foreign Priority claimed	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY	SHEETS	TOTAL CLAIMS	INDEPENDENT CLAIMS
35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance	PA	DRAWING 4	79	3

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## TITLE

Adhesive applicator

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other
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